

**Minutes of the
Tobacco Education and Research Oversight Committee (TEROC)
The Sheraton
Campagno Room
1230 J Street
Sacramento, CA 95814
May 22, 2013**

MEMBERS PRESENT:

Ms. Denise Adams-Simms, Dr. Lourdes Baezconde-Garbanati, Dr. Wendel Brunner, Ms. Pat S. Etem, Dr. Alan Henderson, Dr. Pamela Ling, Dr. Michael Ong (Chair), Mr. Myron Dean Quon, Dr. Dorothy Rice, Ms. Peggy Uyeda, Dr. Shu-Hong Zhu

MEMBERS ABSENT:

Dr. Lawrence Green

OTHERS IN ATTENDANCE:

Kimberly Amazeen, American Lung Association (ALA)
Dr. Bart Aoki, Tobacco Related Disease Research Program (TRDRP)
Philip Chen, Department of Finance (DOF)
Lindsey Freitas (ALA)
Dr. Phillip Gardiner, TRDRP
Tonia Hagaman, California Tobacco Control Program (CTCP)
Rich Heintz, Local Lead Agencies (LLA)/Project Director's Association (PDA)
Tom Herman, California Department of Education (CDE)/Coordinate School Health and Safety Office (CSHSO)
Dr. Jonathan Isler, CTCP
Jerry Katsumata, CTCP
Susan Kratochvil-Smith, California Department of Public Health (CDPH)/Medi-Cal Incentives to Quit Smoking (MIQS)
Richard Kwong, CTCP
Linda Lee, CTCP
Jamie Morgan, American Heart Association (AHA)
Brandon Nunez, DOF
Valerie Quinn, CTCP
Alison Ramey, American Cancer Society (ACS)
Nadine Roh, CTCP
Jessica Safier, California Department of Health Care Services (DHCS)
Alexandria Simpson, CTCP
Gordon Sloss, DHCS
Colleen Stevens, CTCP
Cynthia Vela, CDPH/MIQS
Greg Wolfe, CDE/CSHSO

1. WELCOME, INTRODUCTION, AND OPENING COMMENTS

TEROC Chair, Dr. Ong, called the meeting to order at 9:41 a.m. TEROC members and guests introduced themselves.

2. APPROVAL OF MINUTES FROM THE DECEMBER 11, 2012 TEROC MEETING, CORRESPONDENCE, AND ANNOUNCEMENTS

Acceptance of the January 30, 2013 and April 10, 2013 minutes with minor amendments moved by Dr. Henderson, seconded by Ms. Etem; motion carried.

The chair reviewed TEROC-related correspondence:

Incoming Correspondence:

The Chair reviewed correspondence including:

- Letter from Carol McGruder of The African American Tobacco Control Leadership Council regarding CTCP's Capacity Building Network. This letter was read at the TEROC meeting on January 30, 2013.
- Email from Tom Herman, Administrator of CDE/CSHSO requesting a letter of support for Assembly Bill (AB) 320; email is dated March 8, 2013.
- Email from Vanessa Marvin, State Director of Advocacy, ALA/Center for Tobacco Policy & Organizing requesting a letter of support for AB 746; email is dated April 4, 2013.
- Email from Erin Reynoso, ALA/Center for Tobacco Policy & Organizing requesting a letter of support for Senate Bill (SB) 768; email is dated April 29, 2013.

Outgoing Correspondence:

- TEROC Abstract submission to the American Public Health Association (APHA); abstract was submitted on February 1, 2013.
- TEROC letter of support for AB 320 to The Honorable Carol Liu; Chair of the Senate Health Committee; letter is dated April 29, 2013.
- TEROC letter of support for AB 746 to The Honorable Norma Torres; Chair of the Assembly Housing and Community Development Committee; letter is dated April 10, 2013.

Dr. Ong asked about the outcome of the TEROC abstract, and Dr. Baezconde-Garbanati said they should hear in June. Submitting the TEROC abstract was a dissemination strategy of the Master Plan Dissemination subcommittee.

Dr. Ong provided an update on AB 746. Even though the support letter was sent out in a timely manner, the bill was deferred and no further action will occur during this legislative year.

There was also discussion about the amendment to AB 320. Before the amendment, Dr. Henderson attended the April committee hearing and testified on behalf of TEROC.

3. ENVIRONMENTAL UPDATE

The Chair highlighted the following recent developments:

Altria to enter the e-cigarette market

Altria Group Inc. officially announced it would roll out its own version of e-cigarettes in the second half of 2013. Altria is now playing catch-up to smaller rivals. Reynolds American Inc., the number two cigarette player, said it plans to expand distribution of its Vuse e-cigarettes after bringing them in test markets in recent months. Lorillard Inc., the number three player, paid approximately \$135 million a year ago to acquire Blu Ecigs, a leading e-cigarette company. U.S. retail sales of e-cigarettes are expected to increase significantly within the next year.

2013 American Academy of Health Behavior (AAHB) Lifetime Achievement Award

AAHB proudly honored Dr. Lawrence Green, DrPH, DSc (Hon) on Sunday, March 17, 2013 with the 2013 AAHB Lifetime Achievement Award for his significant influence and impact on the field of health behavior research.

California's Tobacco Control Program Generates Huge Health Care Savings, Study Shows

A new study by UC San Francisco revealed that over a span of nearly 20 years, California's Tobacco Control Program cost \$2.4 billion and reduced health care costs by \$134 billion.

President's plan to increase tobacco tax will prevent kids from smoking and save lives

Matthew L. Myers, President, Campaign for Tobacco-Free Kids released a statement regarding President Obama's plans to propose an increase in the federal tobacco tax to pay for early childhood education initiatives. According to his statement, a significant tax increase would prevent kids from smoking, encourage smokers to quit, save lives and save money by reducing tobacco use, which is the nation's number one cause of preventable death and kills more than 400,000 Americans every year.

Bloomberg bill would make stores conceal cigarettes

Mayor Michael R. Bloomberg proposed a bill which would make New York the first city in the nation to force retailers to keep tobacco products hidden. He said they would be kept, for example, in a cabinet or a drawer, behind the counter or a curtain, but not anywhere customers could see them. He also proposed a second bill that would raise penalties for retailers who evade tobacco taxes by selling smuggled cigarettes, prohibit them from redeeming coupons and require them to sell cheap cigars and cigarillos in

packs of at least four. It would also create a minimum price of \$10.50 per pack for cigarettes and little cigars as a further disincentive to smoke.

Centers for Disease Control and Prevention (CDC) releases report regarding smoking and mental illness

According to a *Vital Signs* report released by CDC in collaboration with the Substance Abuse and Mental Health Services Administration (SAMHSA) on February 5, 2013, adults with some form of mental illness have a smoking rate 70 percent higher than adults with no mental illness. According to the report, nearly one in five adults in the United States, or about 45.7 million Americans, have some type of mental illness. "Special efforts are needed to raise awareness about the burden of smoking among people with mental illness and to monitor progress in addressing this disparity," said SAMHSA Administrator Pamela S. Hyde.

Government quits legal battle over graphic cigarette warnings

The federal government, facing a court-imposed deadline and fierce opposition from the tobacco industry, has decided to abandon its legal fight to require cigarette makers to place large, graphic labels on their products warning of the dangers of smoking. The decision marks a setback for the Food and Drug Administration (FDA), which two years ago announced that it would require tobacco manufacturers to include new images on all cigarette packages. The proposed labels included pictures of disease-ridden lungs, the corpse of a smoker and a man exhaling through a tracheotomy hole. They also included the number of a top-smoking hotline, 1-800-QUIT-NOW.

Debi Austin dies at 62, star of jarring 1990's anti-smoking ad

Debi Austin died in February after a 20-year battle with cancer. She was 62. According to the California Department of Public Health, Austin was California's best known anti-tobacco advocate and noted that her "Voicebox" ad is "the most recognized and talked about California tobacco control ad." "Debi was a pioneer in the fight against tobacco and showed tremendous courage by sharing her story to educate Californians on the dangers of smoking," the agency's Dr. Ron Chapman said in a statement.

Cigars expected to be targeted by FDA regulation

The FDA is expected to extend its reach to a broader range of tobacco products. At the top of that list: cigars, which have experienced a boom in recent years even as cigarette sales have declined, in part because of growing popularity among young people.

UCLA stops smoking on Earth Day

UCLA is leading the way by becoming the first of the UCs to enforce a smoke-free policy. In January of 2012, UC President Mark G. Yudof sent a letter to chancellors announcing a smoking ban for all UC campuses.

TEROC had a preliminary discussion on electronic cigarettes (e-cigarettes). Members felt the topic of e-cigarettes was too large to discuss during this meeting. Members talked about scientific based evidence and information around e-cigarettes, harm reduction, social norm change and dual usage. After broad discussion, TEROC members did agree on the following action items:

Action Items:

- 1) Dr. Brunner moved that TEROC officially oppose the use of e-cigarettes in all areas where other tobacco products are banned. Ms. Adams-Simms seconded the motion; an abstention from Dr. Zhu; motion carried.
- 2) TEROC members moved to form an E-Cigarettes Subcommittee. This Subcommittee would explore the issue to inform and educate, as well as strategize, provide recommendations to TEROC. The Subcommittee can invite outside people to the workgroup. The workgroup will include:
 - Dr. Brunner, Chair
 - Dr. Ling
 - Dr. Zhu
 - Dr. Gardiner

Alexandria Simpson will provide support to the subcommittee and will schedule future meetings. The Subcommittee will report back to TEROC at the fall meeting which will be held in the Bay Area.

Also during TEROC's e-cigarettes discussion, Dr. Brunner shared news that Contra Costa County recently approved the banning of e-cigarettes where other tobacco products are banned. The county health department's argument was focused on norm change; and how it should not be allowed in public places.

Lastly, Dr. Gardiner of TRDRP informed TEROC that they will host a scientific e-cigarettes webinar in the fall (late September or early October). The expert presenters on the webinar include Jean Francois, Chris Bullen, and Prue Talbot.

4. BUDGET UPDATE, DEPARTMENT OF FINANCE

Mr. Philip Chen and Mr. Brandon Nunes, DOF, highlighted the following items from the Proposition 99 accounts in the Governor's 2013–14 May Revise budget:

Mr. Chen informed TEROC regarding the process for estimating Prop 99 revenues. DOF has a Financial Research Unit that works closely with the

California Board of Equalization (BOE) to develop the data sources which focuses on three areas:

- a. BOE's estimated per capita consumption (these are from BOE Annual Reports)
- b. DOF's population estimates (this comes from DOF's Demographic Unit)
- c. Tax rate: \$0.87 (\$0.25 for Prop 99) per pack

Mr. Chen's presentation included helpful links that describes the methodology used for estimating Prop 99 revenues.

Mr. Chen also discussed the Adjustments to the 2012 Appropriations. There were no changes to the Prop 99 Revenue estimates from when DOF presented the Governor's Budget at the TERO meeting in January:

- Governor's Budget Estimate: \$272 million
- May Revision Estimate: \$272 million

Consequently, there were also no Prop 10 backfill changes either:

- Governor's Budget Estimate: \$11.6 million
- May Revision Estimate: \$11.6 million

There were no changes to the Expenditures for the 2012 Appropriations and to the Governor's Budget revenues estimate for 2013-14. There was an estimated \$8 million revenue decrease from 2012-13.

- 2012-2013 estimate: \$272 million
- 2013-2014 estimate: \$264 million

For the May Revision 2013-14 Expenditures, there were no changes to the total expenditure levels. Also note there a small \$30,000 increase for the Major Risk Medical Insurance Program (MRMIP) because fee revenue was slightly reduced. This increase was offset by a \$30,000 reduction to the DHCS Hospital Services.

The Chair thanked Mr. Chen and Mr. Nunes for their presentation.

5. VOLUNTARY HEALTH AGENCY UPDATE

Ms. Kimberly Amazeen of ALA and Ms. Jamie Morgan of AHA presented the voluntary health agency update with status information on the following tobacco related bills.

The following bills will not move further in 2013:

- AB 1142 (Bloom – D, Santa Monica): Smoke-free Beaches and Parks. This bill would have prohibited the use of cigarettes, cigars and other tobacco products at state beaches and parks. This bill was approved 9-6 by the Assembly Water, Parks and Wildlife Committee on April 16, 2013 but failed to be approved by the Assembly Governmental Organizations Committee by a vote of 6-8 on April 24, 2013.

- AB 746 (Levine – D, Los Angeles): Smoking – Prohibition in Multifamily Dwelling. This bill would have prohibited smoking in all multifamily residences including patios and balconies. This bill failed to be approved by the Assembly Housing and Community Development Committee by a vote of 2-5 on April 17, 2013. ALA in California is the sponsor of this legislation.

The following bills are experiencing challenges:

- AB 320 (Nazarian – D, Los Angeles): Tobacco Use in Schools. This bill would prohibit the use of tobacco products on all school grounds. Current law prohibits the use of tobacco products on school grounds when the school receives funding through the Tobacco Use Prevention and Education (TUPE) program. This bill would require that school districts and county offices of education adopt and enforce tobacco free school campus policies regardless of whether or not the school receives TUPE funding. This bill was amended on April 2, 2013 to emphasize the availability of TUPE funds for charter schools, as well as expand the prohibition of tobacco use to include charter schools. Status: AB 320 was approved the Assembly Education Committee on March 20, 2013, with a vote of 6-0. Next steps: AB 320 was referred to the Assembly Appropriations Committee where it is being held on the suspense file, which requires a special vote to get out of committee.
- SB 768 (de Leon – D, Los Angeles): Cigarette and Tobacco Product Taxes. This bill was amended on April 17, 2013 to impose a \$2.00 tax on a pack of cigarettes. The revenue will be used to fund proven and effective tobacco prevention and cessation programs, as well as improved access to health care for low-income families. Status: SB 748 was approved by the Senate Governance and Finance Committee by a vote of 5-2 and the Senate Health Committee by a vote of 6-2 both on May 8, 2013. Next steps: SB 768 is now in the Senate Appropriations Committee where it awaits a hearing.

These bills are being monitored by the voluntary organizations (ACS, AHA, ALA) as they continue to move through the legislative process:

- AB 352 (Hall – D, Compton): Foster Care – Smoke-Free Environment. This bill would prohibit the use of tobacco in homes that provide residential care for foster youth, including in garages, bathrooms, and cars. History: AB 352 was approved by the Assembly Governmental Organizations Committee on April 16, 2013 with a vote of 5-2. The bill was then heard in the Assembly Human Services Committee on April 24, 2013 where it was approved unanimously.

Status: AB was approved 12-5 by the Assembly Appropriations Committee on May 8, 2013.

Next steps: AB 352 will now be voted on by the full Assembly.

- AB 640 (Hall – D, Compton): Cigarettes and Tobacco Products: Retailers Licenses. This bill was amended on March 19, 2013 to allow military ID's without physical descriptions to act as proof of a purchaser's age.
Status: AB 640 was unanimously approved by the Assembly Governmental Organizations Committee on May 8, 2013.
- SB 680 (Wolk – D, Davis): Tobacco Settlement Fund. This bill was amended on April 1, 2013 to require non-participating tobacco manufacturers (those who did not sign up to the Master Settlement Agreement in 1998) to either join the Master Settlement Agreement, or to place a specified amount into a specific fund.
Status: SB 680 was unanimously approved by the Senate Judiciary Committee on May 7, 2013.
Next steps: SB 680 will now be referred to the Senate Appropriations Committee where it awaits a hearing.
- SB 648 (Corbett – D, San Leandro): Electronic Cigarettes – Restriction of Use and Advertising. This bill would prohibit the use of e-cigarettes in all areas where cigarettes are prohibited by state law. This includes day care facilities, public buildings, retail food facilities and health facilities. It also extends the prohibitions on the advertising of tobacco products to include the advertising of e-cigarettes.
Status: SB 648 was approved by the Senate Health Committee on April 17, 2013 by a vote of 6-2. SB 648 was heard in Senate Judiciary Committee on April 30, 2013 where it was approved 4-2.
Next steps: SB 648 will now be referred to the Senate Appropriations Committee where it awaits a hearing.

Mr. Wolf and Mr. Herman of CDE informed TEROc that AB 320 has substantially changed from when it was originally introduced. The language regarding signage was removed because of cost related factors. Bills in the past had similar experiences (i.e smoke-free parks and beaches) because of costs associated with the bill, in addition to the state's financial climate.

TEROC discussed AB 640. Members expressed concerns with the proposed legislation because a military ID does not provide specific or enough information to purchase tobacco products. It does not include date of birth and detailed descriptions similar to an issued driver's license. Another concern is that the military population has high smoking prevalence rates among Hispanics/Latinos and African Americans. The voluntary health organizations will meet with Assembly Member Hall's office to better

understand his proposed legislation. The voluntary health organizations will continue to monitor these bills and provide TEROC updates.

Ms. Amazeen spoke about SB 648. Senator Corbett has been working on e-cigarettes for a while. Advocates including the California Medical Association (CMA) and the California Black Health Network (CBHN) have come forward, requesting stronger restrictions on the use and advertising of e-cigarettes. The national voluntary organizations (ACS, AHA, ALA) and the Campaign for Tobacco Free Kids have issued policy guidelines on e-cigarettes which were shared with Dr. Ong. Pressure is being placed on the U.S. FDA to investigate e-cigarettes as a drug delivery device; however, the timeline for this is unknown. Below are Action Items from TEROC:

Action Items

- 1) Dr. Brunner moved TEROC write a letter of support for SB 648. Dr. Henderson seconded the motion; an abstention from Dr. Zhu; motion carried. Letter will be copied to: CMA, CBHN, ACS, AHA and ALA.
- 2) Dr. Henderson moved TEROC write a letter of opposition for AB 640. Ms. Etem seconded the motion; motion carried unanimously.
- 3) Ms. Adams-Simms moved TEROC draft a letter of concern to Assembly Member Hall regarding AB 352. This letter is contingent upon an analysis update by the voluntary health organizations which will be shared with Dr. Ong. Members agreed to give Dr. Ong authority to send the letter on behalf of TEROC. Dr. Henderson second the motion; motion carried unanimously.
- 4) Dr. Henderson moved TEROC write a letter of support for SB 768. Dr. Baezconde-Garbanati seconded the motion; motion carried unanimously.

The Chair thanked Ms. Amazeen and Ms. Morgan for their presentation.

6. CALIFORNIA DIABETES PROGRAM: MEDI-CAL INCENTIVES TO QUIT PROJECT (MIQS)

Ms. Safier of DHCS, Ms. Vela, and Ms. Kratochvil-Smith of CDPH presented the MIQS project.

DHCS has three goals for the MIQS project:

- 1) Improve the health of all Californians
- 2) Enhance quality, including the patient care experience, of all DHCS programs
- 3) Reduce DHCS's per capita health care program costs

The MIQS Project views tobacco use prevention and treatment as a flagship for DHCS's prevention strategy. The MIQS Project is a \$10 million grant from Centers for Medicare and Medicaid Services. A total of 10 states received funding for incentive based projects that focuses on tobacco, diabetes, and obesity. The timeline for the project is September 2011 through September 2016. The MIQS team is made up of representation from DHCS, California Diabetes Program (CDP), California Smokers' Helpline, Institute for Health and Aging (IHA), CTCP, as well as an Advisory Team.

The MIQS Project is an incentive program with the goal of reducing smoking prevalence among Medi-Cal beneficiaries. There are three distinct projects involved:

- Outreach (coordinated by the CDP)
- Intervention (coordinated by UCSD Smokers' Helpline)
- Economic Evaluation (coordinated by UCSF, IHA)

RTI International will conduct independent evaluations of MIQS and other state based projects.

Incentives are used for the MIQS Project because economic incentives on consumer's preventive health behaviors have an approximately 73% success rate. Also these incentives are short term; reflecting simple preventive care with well-defined behavioral goals. The goals are to see:

- Will providers refer?
- Will smokers call?
- Will smokers quit?
- Is there a return on investment?

CDP is responsible for the promotion and marketing of the MIQS project. The goal is to increase calls from Medi-Cal members to the California Smokers' Helpline through the use of incentives. The MIQS project plans to target healthcare providers, health plans, and social service organizations to provide education on clinical practice guidelines for tobacco dependence.

Medi-Cal Members have a high smoking prevalence: 19.9% Medi-Cal Members vs. 12% California. There are higher prevalence rates in rural counties, as high as 40-45%. Also the cost of treating tobacco-related illness is estimated to be about 11% of the total Medicaid program costs. With high prevalence rates amongst Medi-Cal members, the project has a statewide outreach target which include state/health department programs, county health departments, non-profit and social service organizations, healthcare providers and medical and specialty associations. MIQS also wants to partner with non-traditional partners including Indian/Rural health clinics, UC Davis Family Medicine, CMA, and the Network of Ethnic Physicians. The MIQS team would also like to get the message out to First Five California, CDE's TUPE grantees, and California Resource Centers.

Several of the statewide outreach activities include information and news on the MIQS website, quarterly e-mail blasts to CDP partners, newsletters and listservs, webinars, presentations and meetings, and pharmacy fax blasts. Activities in development include provider mailing of posters and postcards, two MIQS promotion videos for providers and members, and media roll-out of public service announcements, news releases, ethnic and social media in targeted counties.

A targeted county outreach campaign will be conducted from January through May 2013 in Sacramento, Butte, El Dorado, Merced, San Joaquin and Stanislaus counties. Then, from June through December 2013, a targeted campaign will be conducted in Los Angeles and San Diego. The smoking prevalence rate among among Medi-Cal members in Sacramento County is 35%. Of the Sacramento County Medi-Cal members who called the California Smokers' Helpline from March 2012 through March 2013, 557 members asked for the \$20 incentive; 1126 members did not ask for the \$20 incentive. For San Joaquin County, there were 71 members that asked for the \$20 incentive; 475 did not ask for the \$20 incentive. For both counties, the MIQS project reached out to their local tobacco control coalitions, groups funded under the Community Transformation Grants, private health systems, Family Resource Centers, Medi-Cal Eligibility offices and Federally Qualified Health Centers.

From the targeted county outreach campaign it was learned, that this effort results in a slight increase in callers requesting the \$20 incentive above that achieved from the statewide outreach effort. Additionally, the MIQS project learned that media and advertising directed at Medi-Cal members facilitates their engagement.

The MIQS team gave a brief overview of the California Smokers' Helpline, the services that are provided as well as who accesses these services (47% of Medi-Cal members access the Helpline). The Helpline provides standard telephone counseling. The counseling includes a comprehensive pre-quit session to include motivation, planning, setting a quit date, and the discussion of quitting aids including nicotine patch use. Also there are up to four proactive follow-up calls.

Based on the MIQS incentives, the assessment includes:

- 1) Outreach to Medi-Cal beneficiaries incentivizing smokers to enroll in Helpline counseling (\$20 gift card)
- 2) A randomized trial that tests three policies of sending nicotine patches and offering incentives for continuing in Helpline counseling
- 3) A randomized trial of a re-enrollment incentives

There will be two embedded trials which include the effect of patches and retention incentives on treatment outcomes and the effect of incentives on re-

enrollment in counseling. Enhanced services will start in July 2013, with free nicotine patches that will be sent directly to members for those who re-engage in counseling.

There is an economic research team at UCSF IHA that will conduct a formal economic analysis of the two components of the MIQS project. This analysis will evaluate the effectiveness of the outreach, materials, the intervention, and nicotine replacement therapy. The economic research team will look at the short term cost model which focuses on the estimate of smoking costs. And the team will look at the long term cost model which focuses on cardiovascular diseases such as stroke and heart attacks.

TEROC wanted to know how the amount for the incentive was decided. Mr. Sloss of DHCS said they researched appropriate amounts for incentives; however, there wasn't much information available. The MIQS team felt the \$20 incentive was an appropriate and reasonable amount that would motivate and help increase volume to the Helpline. Dr. Zhu mentioned the Helpline has an internal policy that members must mention the \$20 incentive to receive it. Also TEROc asked about the sustainability plan after the five year project. The MIQS team said RTI is conducting the evaluation of the project and with the results, they hope to utilize it to extend the length of the project. TEROc recommend the MIQS project target Lesbian, Gay, Bi-Sexual, Transgender (LGBT) Medi-Cal members, specifically when outreach is in the Los Angeles and San Diego areas.

The MIQS team provided TEROc members and the audience copies of the promotional materials. Materials are available in the following languages: Vietnamese, Korean, Chinese, and Spanish.

The Chair thanked Ms. Safier, Ms. Vela, and Ms. Kratochvil-Smith for their presentation.

7. CALIFORNIA DEPARTMENT OF EDUCATION REPORT

Mr. Herman and Mr. Wolfe presented the CDE update and activities related to the 2012-2014 Master Plan.

CDE met with CTCP to discuss the Retail Campaign and CDE's top priorities. The staff of CDE and TRDRP continue to develop a subvention agreement to guide future CDE funding for the School Academic Research Awards (SARA). They discussed the reviewers' recommendations regarding how the SARA funding mechanism might better generate the kinds of research both CDE and TRDRP would like to fund. CDE has approved a subvention contract with UCSF to support school costs related to participating in a TRDRP SARA grant. The UCSF researchers will develop, test, and implement a toolkit containing a set of youth development modules applied to school-based

tobacco control and education efforts. The CDE representative to TRDRP's Scientific Advisory Committee participated in the February 4th meeting to discuss the Cycle 22 funding recommendations and upcoming call for applications.

CDE conducted a statewide meeting for County TUPE Coordinators in March. The meeting included an expert panel that identified best practices for addressing the tobacco-use prevention needs of LGBT Questioning youth. Panelists included Bob Gordon of California LGBT Partnership, Ilsa Bertolini of San Francisco Unified School District, Brian Davis, a TUPE Coordinator, and Chris White of Gay-Straight Alliance Network. As a result, County TUPE Coordinators began to reframe their efforts to prevent tobacco use by LGBTQ youth using more culturally competent content based on the information shared by the panel. The coordinators unanimously recommended adding a question to the California Healthy Kids Survey to identify LGBTQ respondents in the future.

The CSHSO is now working to invite a panel of experts in serving the needs of the Hispanic/Latino youth to talk to the County TUPE Coordinators at their next statewide meeting in September. The objective is to help County TUPE Coordinators reframe their efforts to prevent tobacco use by Hispanic/Latino youth by using more culturally competent content based on expert advice. Also at the March statewide meeting, County TUPE coordinators were given a copy of the 2012-2014 TEROC Master Plan. Coordinators were asked to intentionally boost the quit attempt rate across priority populations and for at-risk youth.

The CSHSO continues to monitor the tobacco-free certification of every LEA. County Offices of Education are working to recertify LEAs within the counties whose certification as tobacco-free agencies expire on June 30, 2013. They continue to push for the certification of districts and direct-funded charter schools which are not currently certified. Only LEAs certified or recertified as tobacco-free by June 30, 2013 will be eligible to apply for 2014 Cohort J TUPE Competitive Grant funds for 2014-17. A report of the status of tobacco-free schools in California will be presented at the next TEROC meeting.

Also AB 320 continues to wind its way through the legislative process. At the time of this update, the bill is being held in suspense in the Assembly Appropriations Committee. The bill was amended on April 2nd removing the language that would have the funding base linked to enrollment instead of Average Daily Attendance. In addition, the requirement for schools to prohibit the use of tobacco products was moved to a new section in Health and Safety Code. This new language only requires schools in California to prohibit tobacco use, but does not require the LEAs to adopt policies prohibiting tobacco use on school grounds. The policy requirement will remain should the LEA apply for TUPE funds from CDE. Discussion still continues as to the best

way to exempt the use of tobacco cessation aids by adults (patch, gum, etc.) and inclusion of a ban on e-cigarettes in the policy.

CDE reported the: **2009-13** Cohort E and F, **2013-14** E(x) and F(x), **2011-14** Cohort G, and **2012-15** Cohort H TUPE Grantees continue to implement grant activities including the following:

- Meeting CDE expectations regarding project implementation
- Making appropriate use of grant funds
- Monitoring activities and budget expenditures
- Submitting progress reports

The 2013 Cohort I TUPE Request for Applications (RFA) to award Tier 1 Competitive Grants was released on September 18, 2012. Tier 1 applicants were received from 25 lead applicant agencies representing a total of 111 LEAs. Two applicants did not achieve the minimum score to qualify for funding. Grant awards in excess of \$4,500 are for consortium grantees serving multiple LEAs. The total amount of the Cohort I Tier 1 grant awards is \$414,000. With the addition of the Cohort I grantees, 639 of California's school districts are obligated to enforce a tobacco-free school policy as condition of their receipt of TUPE funds.

The 2012 Cohort I TUPE RFAs to award Tier 2 Competitive Grants was released on October 23, 2012. Tier 2 applications were received from 35 lead applicant agencies representing a total of 110 LEAs. Six applicants did not achieve the minimum score to qualify for funding. Another 12 applicants achieve the minimum score to qualify for funding but were not awarded a grant because there is insufficient funding available to award grants to all qualified applicants. CDE will release the Intent to Award notice for the 17 successful applicants by May 20, 2013. A list of new Cohort Tier 2 grantees and the grant awards will be included in the next agency report submitted to TERO. The overall number of lead applicants responding to the TUPE RFA has increased significantly compared to last year. CDE anticipates an even larger number of LEAs will submit applications in response to the 2014 Cohort J RFA.

The Cohort I Tier 2 applications exhibited a significantly increased commitment to developing California's next generation of tobacco-free advocates and a growing capacity to ensure that priority populations are equitably included in tobacco-use intervention and cessation efforts. More applicants are adopting tobacco prevention strategies and activities consistent with the Master Plan's Objectives.

The 2013-14 RFA for the County Technical Assistance and Leadership Funds (CTALF) apportionment has been posted to CDE's Available Funding webpage at <http://www.cde.ca.gov/fq/fo/profile.asp?id=2396> Responses are due from County Offices of Education by May 31, 2013 as to whether they will

accept the funding to provide technical assistance to LEAs within their county for the 2013-14 school year. A list of the program assurances can be accessed at the above webpage.

CDE reported the 2013 TUPE Tier 2 applicants started to adopt the overarching goal to get all tobacco users into a “Quit Machine” process that helps youth cycle through multiple quit attempts until they have successfully quit. Applicants have proposed using established intervention and cessation strategies in combinations with the California Smokers’ Helpline, the National Cancer Institute’s free Quit Pal smart phone app, and other local quit resources to motivate relapsed youth smokers to make fresh quit attempts.

The 2013 TUPE Tier 2 applicants have begun to create a new standard for grantees to ensure that priority population youth receive the tobacco use intervention and cessation support needed. On April 30, 2013, the TUPE Tier 2 grantee project leads from Los Angeles Unified School District, Orange County Office of Education, and Stanislaus County Office of Education have renewed their partnership with the communications staff from the California Smokers’ Helpline to develop new set of outreach materials designed to target teens and youth. The TUPE project leads are committed to being a part of a steering committee that develop creative briefs for a brochure, poster, and/or card that promote the Helpline and then provide the briefs to a graphic designer who will create three comps for each. The comps will then be provided to the committee members to poll the teens with whom they work. The comp receiving the majority of youth votes for each piece will be made available for duplication.

CDE shared with TERO members a sample copy of the TUPE Cohort I Competitive Grant application. A question was asked if assistance is available to applicants who do not receive an award. CDE said applicants are welcome to come to their office to review and take notes of strong applications that received funding because the applications may not leave the CDE office. CDE staff are also available to provide technical assistance. Dr. Brunner mentioned the schools that receive TUPE funding in Contra Costa County have the resources to apply for competitive funds; however, the need should be focused on schools in the low-income communities. For TUPE funding, it was suggested the focus should be a balance of the schools where there is a need to address health equity and the schools that show an interest in doing tobacco control work. Also, there should be capacity building available to the schools that are interested but do not have the resources or infrastructure to apply for competitive funds. With decreasing funds, CDE said it is difficult to implement these suggested changes because it requires legislative changes and CDE is short staffed.

Dr. Ong suggested that CDE put together a map identifying the areas that receive TUPE funding vs. the areas that do not. The funding map should also

include information such as: size of the school district, average income level, students on free reduced lunch, and smoking prevalence. Dr. Ong recommended CDE work with Dr. Isler from CTCP to get the smoking prevalence data.

The Chair thanked Mr. Herman and Mr. Wolfe for their presentation.

8. CALIFORNIA DEPARTMENT OF PUBLIC HEALTH, CALIFORNIA TOBACCO CONTROL PROGRAM REPORT

Ms. Stevens and Dr. Isler presented the CDPH, CTCP update.

Ms. Stevens began the presentation by announcing the audit, requested from Senator Alex Padilla's office, of the Stop Tobacco Access to Kids Enforcement (STAKE) Act will soon be completed. Nearly a year ago, Senator Padilla proposed legislation that would have resulted in the posting of the names of the retailers who sold tobacco products to minors. The data for the Youth Tobacco Purchase Survey (YTPS) is the result of the work performed under CTCP's contract with the San Diego State University Research Foundation and required an Institutional Review Board (IRB). Due to the IRB that protects the human subjects of the study, concerns were raised about releasing the name of the retailers/store owners who are the human subjects of the YTPS survey. The California State Auditor's office reviewed records, for the past three year period, from CTCP related to the SYNAR Amendment and STAKE Act as well as CDPH, Food and Drug Branch related to their STAKE Act compliance checks. For more information about the audit, it can be accessed at <http://www.bsa.ca.gov/>

Ms. Stevens also informed TEROC about CDPH/CTCP contracting challenges since spring 2012. These challenges have affected CTCP's statewide contracts including the California Smokers' Helpline and Tobacco Education and Materials Lab which had a gap in service. A major challenge is related to Government Code (GC) Section 19130 which requires the state's work be performed by state civil service employees unless an exemption applies. When contracts move through the approval process, responses are required to address GC Section 19130 related questions such as:

- a. Do you have staff that can do this job or perform these services?
- b. Can you train staff to do this job?
- c. Can you call another state agency or department and see if they can perform these services?

Contracts will continue to be a challenge and CTCP has more than 30 competitive grants that are up for renewal in fiscal year 2014-15. Dr. Ong mentioned last year, he was tasked to schedule a meeting with Dr. Ron Chapman, Director of CDPH; however, it has been difficult with conflicting

appointments. One of the agenda items was to better understand and talk about the contract challenges.

Action Item

- 1) Ms. Etem moved TERO to write a letter to CDPH regarding the contracting challenges. Dr. Zhu seconded the motion; motion carried unanimously.

Lastly, Dr. Isler announced the training documents and tools were finalized for CTCP's Retail Environment Campaign training that will occur May, 2013. The baseline retail data collection, which will take place during summer 2013, will support the long term-strategy of evaluating what is going on in the retail environment while collaborating with Nutrition and Alcohol prevention colleagues. Extensive pilot testing of the survey, with the involvement of Alameda County tobacco control program was done. Technical assistance and training (in-person and webinar) will be provided to the field on an on-going basis to support their data collection efforts.

Stanford University, the Tobacco Control Evaluation Center (TCEC), California Youth Advocacy Network (CYAN), and CTCP will host a Retail Campaign Training on May 29-30, 2013, which will train the Local Lead Agencies (LLAs) in data collection in retail stores during the summer of 2013. The training will take place at the Hyatt Regency, Downtown Sacramento, and will focus on the following:

- 1) Identifying relevant tobacco, nutrition and alcohol products
- 2) Covering the Retail Campaign Evaluation Survey, survey protocol, and optional modules such as a joint Nutrition/Alcohol module, price and price promotions, flavored module, and product displays and storefront advertising
- 3) Training local data collectors to complete store surveys
- 4) Troubleshooting problems in the field
- 5) Recruiting youth and adult data collectors
- 6) Filling out the survey, including a core module
- 7) Attending field trips to local stores to better recognize store layouts and available products

CTCP anticipates more than 200 participants will attend this training, including LLAs and Nutrition and Alcohol partners from the state and various counties.

This summer, more than 10,000 stores will be surveyed during the data collection. The stores in the sample surveys are licensed tobacco retailers which include big box stores, gas stations, convenient stores, and nontraditional places such as donut shops. Examples of stores that will not be included in the survey are paid membership stores as well as bars, and

hookah lounges because LLAs who utilize youth data collectors would have difficulty gaining access into bars because of the age limitation.

TEROC wanted to know if the survey has been pilot tested. Also they wanted to know the policy strategies behind the Retail Campaign. Dr. Isler responded and informed TEROC the survey has been pilot tested in Alameda and Sacramento counties. The pilot test engaged youth, county staff and CTCP staff. Their experiences were positive and no one was turned away by the retailers. Materials were developed for the training to prepare the data collectors including a store script for them to feel comfortable when entering a retail store. Dr. Isler said a few of the policy strategies include minimum price, flavored products, exterior advertising and other tobacco products in consultation with ChangeLab Solutions. After the data is collected and analyzed, Ms. Stevens said there will be media activities to support the Retail Campaign efforts that will include spokesperson training and press events.

The Chair thanked Ms. Stevens and Dr. Isler for their presentation.

**9. UNIVERSITY OF CALIFORNIA OFFICE OF THE PRESIDENT
TOBACCO RELATED-DISEASE RESEARCH PROGRAM REPORT**

Dr. Aoki began the presentation by informing TEROC of Cycle 22 Applications. TRDRP received 192 Letters of Intent and 148 applications were submitted in early January. Rather than receiving an increase in the number of applications, the program received the same number of applications as last year. Below is the breakdown of the Cycle 22 applications received by priority:

Research Priority	Number of Applications 2012	Number of Applications 2013	Percent change in Applications 2012-2013
Environmental Exposure	22	27	23%
Early Diagnosis	51	54	6%
Regulatory Sciences	10	10	0%
Disparities, Cessation, Neuroscience	63	49	-22%
Industry Influence	2	8	300%
Total	148	148	0%

In this Cycle, there were notable increases in applications addressing Environmental Exposure and Industry Influence and a decrease in those addressing Disparities and Cessation.

The following are the Cycle 22 applications by grant type as compared to last year:

Grant Type	Number of Applications 2012	Number of LOIs 2013	Number of Applications 2013	Percent change in Applications 2012-2013
Full CARA	1	2	1	0%
Pilot CARA	11	11	7	-36%
Dissertation Research	6	11	8	33%
Postdoctoral Fellowship	27	29	24	-11%
Pilot SARA	1	4	1	0%
Full SARA	1	0	0	-100%
Research Project	39	79	64	64%
Exploratory/ Experimental Research	62	56	43	-31%
Total	148	192	148	0%

In this Cycle, the number of Exploratory/Experimental grant applications decreased while full Research Project grants increased, presumably due to the lowering of the funding cap for the Exploratory/Experimental grant type. There was also a decrease in applications for Community Academic Research Awards CARA and SARA grant types.

The applications were reviewed by 74 peer reviews in five different panels held in April. They are currently pending a second level of review and funding recommendations by the TRDRP Scientific Advisory Committee at its meeting in early June.

The following are TRDRP annual grant funding numbers over the past 10 years:

Year	Number of TRDRP Grants awarded
2003	58
2004	50
2005	52
2006	43
2007	51
2008	45
2009	79
2010	53
2011	51
2012	36
2013	?

Due to declining Prop 99 revenue allocations, there has been a corresponding downward trend on the number and amount of grants the program has been able to award, with the lowest absolute number of awards

granted in 2012. Given the projected Prop 99 allocation for FY 2013-14, it is likely the number of grants awarded will be comparable to or decrease compared to last year.

Dr. Gardiner talked about TRDRP's Research Dissemination where they participated in the State Senate Judiciary Committee for SB 648 on April 30, 2013. In late September or early October, TRDRP is coordinating a live webcast on E-Cigarettes - the current state of knowledge and research needs. In the spring of 2014, there will be a live webcast on Thirdhand Smoke - the current state of knowledge and policy implications. Also a recent article on Thirdhand Smoke was recently published, "Thirdhand Smoke and exposure in California hotels: non-smoking rooms fail to protect non-smoking hotel guests from tobacco smoke exposure." The article was the first to evaluate the effectiveness of partial smoking bans in hotels.

Lastly, Mr. Aoki updated TEROC about their communications including the Research Grants Program Office (RGPO) Annual Report "Supporting Research, Partnerships, Solutions." The Annual Report includes information on TRDRP and copies were distributed to TEROC members. Also the RGPO and TRDRP websites have been refreshed with a new look. And a new database Altum Easygrants will be used to streamline grants and allows for assessing and analyzing data more readily. The benefit is faster response to questions about grant programs and impact.

The Chair thanked Mr. Aoki and Dr. Gardiner for their presentation.

10. MASTER PLAN 2012-2014

This topic was tabled for the next TEROC meeting.

No public comments.

The Chair adjourned the meeting. Motion carried unanimously.
The meeting was adjourned at 4:03 PM.

A TEROC meeting will be scheduled for late September, early October 2013 in Oakland, CA.